Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	=	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only i	n a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	David First name A.	First name	
	license or passport).	Middle name	Middle name	
	Bring your picture identification to your meeting with the trustee.	Kaufman Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II,	III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5408		

Del	otor 1 David A. Kaufman	l	Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	79 Willow Wood Drive	If Debtor 2 lives at a different address:			
		East Setauket, NY 11733 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Suffolk County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Deb	tor 1	David A. Kaufman					Case	number (if known)	
Part	. 2.	Tell the Court About \	our Bank	runtov Cas	20				
7.	The o	chapter of the cruptcy Code you are sing to file under	Check on	e. (For a bi 10)). Also, (rief description of each, see go to the top of page 1 and o				luals Filing for Bankruptcy
			☐ Chap	ter 11					
			☐ Chap	ter 12					
			☐ Chap	ter 13					
8.	How	you will pay the fee	abo	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more detai about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mone order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check wit a pre-printed address.					
			☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).						
			☐ I re	equest that is not requ t applies to	my fee be waived (You maired to, waive your fee, and	ay request may do so e unable to	o only if your inco o pay the fee in i	ome is less than 150% nstallments). If you cho	of the official poverty line pose this option, you must fill
9.	bank	you filed for ruptcy within the 3 years?	□ No. ■ Yes.						
				District	Eastern District of New York	When	5/09/08	Case number	08-72389-ast
				District		When		Case number	
				District		_ When		Case number	
10.	cases filed not fi you,	ny bankruptcy s pending or being by a spouse who is ling this case with or by a business er, or by an	■ No □ Yes.						
				Debtor				Relationship to y	/ou
				District		_ When		Case number, if	
				Debtor District		When		Relationship to y Case number, if	
				District		_ wnen		Case number, ii	
11.		ou rent your ence?	■ No.	Go to lir	ne 12.				
			☐ Yes.		ur landlord obtained an evicti	on judgm	ent against you a	and do you want to stay	in your residence?
				_	No. Go to line 12.	t About a	Eviation luder	oont Against Vou (Earm	101A) and file it with this
				_	Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	i About al	i Evicuori Juagri	ын Ауашы той (гөгт	TOTA) and the It with this

Deb	otor 1 David A. Kaufman	1			Case number (if known)			
Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor							
	of any full- or part-time business?	■ No.	Go to	Part 4.				
	A colo a constituentis in in	☐ Yes.	Name	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	er, Street, City, Sta	te & ZIP Code			
	it to this petition.		Check	the appropriate bo	x to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
		☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)			Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	dicate that you are ow statement, and t	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am fi	ing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	Penort if You Own or	Have An	, Hazardo	us Property or An	y Property That Needs Immediate Attention			
	Do you own or have any	■ No.	, Huzur do	as i roperty or Air	y Freporty That Reeds Immediate Attention			
	property that poses or is	_						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?								
					Number, Street, City, State & Zip Code			

Debtor 1 David A. Kaufman Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 David A. Kaufman	<u> </u>		Case numb	Case number (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are det rsonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.		business debts? Business debts are debts vestment or through the operation of the bu				
			No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that are not consumer debts or business debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will		No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000	1 25,001-50,000			
	you estimate that you owe?	□ 50-99		□ 5001-10,000	50,001-100,000			
		□ 100-199 □ 200-999		☐ 10,001-25,000 ☐ More than100,000				
19.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		— \$500,	001 - \$1 million					
20.	How much do you estimate your liabilities	□ \$0 - \$		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		001 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		_	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the info	rmation provided is true and correct.			
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I d				
				d not pay or agree to pay someone who is not the notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this			
		I request	relief in accordance with the	e chapter of title 11, United States Code, sp	ecified in this petition.			
bankruptcy case c 1519, and 3571.			cy case can result in fines up d 3571.	nt, concealing property, or obtaining money p to \$250,000, or imprisonment for up to 20				
			d A. Kaufman A. Kaufman	Signature of Debto	or 2			
			e of Debtor 1	Q				
		Executed	I on _ June 27, 2017	Executed on				
			MM / DD / YYYY	MN	// DD / YYYY			

Debtor 1 David A. Kaufman		Case	e number (if known)
For your attorney, if you are represented by one		d States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. §
If you are not represented by an attorney, you do not need to file this page.	342(b) and, in a case in which § 707(b)(4)(D) a in the schedules filed with the petition is incorre		o knowledge after an inquiry that the information
	/s/ Cooper J Macco	Date	June 27, 2017
	Signature of Attorney for Debtor		MM / DD / YYYY
	Cooper I Moses		
	Cooper J Macco Printed name		
	Macco and Stern, LLP		
	2950 Express Drive South		
	Suite 109		
	Islandia, NY 11749		
	Number, Street, City, State & ZIP Code		
	Contact phone 631-549-7900	Email address	
	240151		
	Bar number & State		_

Eille	n this information to identify you	r case:			
Deb	David A. Kaufma First Name	IN Middle Name	Last Name		
Deb	or 2 se if, filing) First Name	Middle Name	Last Name		
` .	d States Bankruptcy Court for the:				
			NEW TORK		
Case (if knd	number			_	k if this is an
				amen	ded filing
	=				
	cial Form 106Sum		. I Contain Otation at Latermantic		
			nd Certain Statistical Information e are filing together, both are equally responsible		12/15
infor	nation. Fill out all of your schedu	lles first; then complete tl	he information on this form. If you are filing amends the box at the top of this page.		
Part	1: Summarize Your Assets				
				Your a	ssets
				Value	of what you own
1.	Schedule A/B: Property (Official F	Form 106A/B)		\$	420,000.00
					·
	1b. Copy line 62, Total personal pro	operty, from Schedule A/B.		\$	3,855.00
	1c. Copy line 63, Total of all proper	ty on Schedule A/B		\$	423,855.00
Part	2: Summarize Your Liabilities				
				Your li	abilities
				Amoun	t you owe
2.	Schedule D: Creditors Who Have (2a. Copy the total you listed in Colu		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D.	\$	441,408.70
3.	Schedule E/F: Creditors Who Have			\$	200,000.00
	• •		ns) from line 6e of Schedule E/F	· · · —	
	3b. Copy the total claims from Par	t 2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$	26,790.82
			Your total liabilitie	e ¢	668,199.52
			rour total nabilities	•	000, 199.52
Part	3: Summarize Your Income an	d Expenses			
4.	Schedule I: Your Income (Official F	form 106I)			
٠.			ə I	\$	5,200.00
5.	Schedule J: Your Expenses (Official Copy your monthly expenses from			\$	5,183.38
Part	4: Answer These Questions fo	r Administrative and Stati	istical Records		
6.	Are you filing for bankruptcy und	ler Chapters 7, 11, or 13?			
0.		-	check this box and submit this form to the court with	your other s	chedules.
7.	■ Yes What kind of debt do you have?				
			debts are those "incurred by an individual primarily for grant of the statistical purposes. 28 U.S.C. § 159.	or a persona	l, family, or
	☐ Your debts are not primarily the court with your other sche		ve nothing to report on this part of the form. Check to	his box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 David A. Kaufman

Case number (if known)

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,600.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	200,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	200,000.00

	David A. Kau	tman .					
Debtor 1	First Name		e Name	Last Name			
Debtor 2 Spouse, if filing)	First Name	Middle	e Name	Last Name			
Jnited States Ba	ankruptcy Court for	the: EASTERN	DISTRI	CT OF NEW YORK			
Case number _							☐ Check if this is an amended filing
Schedul each category, s fits best. Be as c	complete and accurat	operty scribe items. List a e as possible. If tw	o marrie	only once. If an asset fits in more than on d people are filing together, both are equ top of any additional pages, write your n	ally responsible	for supplying	correct information. If
	·			Estate You Own or Have an Interest In			
□ No. Go to Par ■ Yes. Where i	rt 2.	nable interest in an	•				
No. Go to Par Yes. Where i	rt 2.		What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	amount of	any secured cla	ims or exemptions. Put the ims on <i>Schedule D:</i> as <i>Secured by Property</i> .
No. Go to Par Yes. Where i 79 Willow Street address,	rt 2. is the property? Wood Drive if available, or other description.	eription		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	amount of Creditors V	any secured cla Who Have Claim alue of the perty?	ims on Schedule D: as Secured by Property. Current value of the portion you own?
No. Go to Par Yes. Where i 1.1 79 Willow Street address,	rt 2. is the property? Wood Drive if available, or other description	oription		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current valentire projections to the contract of the contract	any secured cla Who Have Claim alue of the perty? 20,000.00 the nature of yo	ims on Schedule D: ss Secured by Property. Current value of the

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Del	David A. Kaufm	an C	Case number (if known)	
3. C	Cars, vans, trucks, tractors	s, sport utility vehicles, motorcycles		
г] No			
	Yes			
3.	1 Make: Chrysler	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model: Jeep	Debtor 1 only		aims Secured by Property.
	Year: 2015	☐ Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	Subject to lease	☐ Check if this is community property	\$0.00	\$0.00
		(see instructions)		
E		homes, ATVs and other recreational vehicles, other vehicles, a tors, personal watercraft, fishing vessels, snowmobiles, motorcycle		
		portion you own for all of your entries from Part 2, including or Part 2. Write that number here		\$0.00
	t 3: Describe Your Personal a			
Do	you own or have any legal	I or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ī	☐ No ☐ Yes. Describe	isc. Household Goods and Furnishings		\$1,000.00
	including cell pho	adios; audio, video, stereo, and digital equipment; computers, prin ones, cameras, media players, games	ters, scanners; music colle	ctions; electronic devices
_	☐ No ■ Yes. Describe			
•	Tes. Describe			
	М	isc. Electronics		\$350.00
ı		urines; paintings, prints, or other artwork; books, pictures, or other a memorabilia, collectibles	art objects; stamp, coin, or	baseball card collections;
9. F	Equipment for sports and h	nobbies		
	Examples: Sports, photograp musical instrume	phic, exercise, and other hobby equipment; bicycles, pool tables, g	golf clubs, skis; canoes and	kayaks; carpentry tools;
	■ No □ Yes. Describe			
[□ No	notguns, ammunition, and related equipment		
	Yes. Describe			
Offic	cial Form 106A/B	Schedule A/B: Property		page 2

Debt	tor 1	David A. Ka	ufman		Cas	e number (if known)	
			misc. firearms				\$1,000.00
			illist. illearills				Ψ1,000.00
	No		lothes, furs, leather c	coats, desig	ner wear, shoes, accessories		
			Misc. Wearing	Apparel			\$750.00
	l No			elry, engage	ment rings, wedding rings, heirloom jewel	ry, watches, gems,	
			Misc. Jewelry				\$250.00
	Examp I No	rm animals bles: Dogs, cats Describe	birds, horses				
			Chameleon				\$0.00
15.	Add to for Pa	art 3. Write that	of all of your entrie number here		t 3, including any entries for pages you	have attached	\$3,350.00 Current value of the portion you own?
							Do not deduct secured claims or exemptions.
	Examp l No		-	-	e, in a safe deposit box, and on hand whe	n you file your petil	iion
					,	Cash	\$5.00
	Examp l No				nts; certificates of deposit; shares in credition the same institution, list each. Institution name:	t unions, brokerage	houses, and other similar
			17.1. Checkir	ng	Capital One (8350)		\$500.00
							· · · · · · · · · · · · · · · · · · ·
	Examp		or publicly traded s, investment account		erage firms, money market accounts		
	No Yes		Institution	or issuer na	me:		

Official Form 106A/B

De	ebtor 1	David A. Kaufman	Case number (if known)
19.	and joi	blicly traded stock and interests in incorporated and un nt venture	incorporated businesses, including an interest in an LLC, partnership,
	■ No □ Yes.	Give specific information about them Name of entity:	% of ownership:
	Negotia Non-ne ■ No	ment and corporate bonds and other negotiable and no able instruments include personal checks, cashiers' checks, egotiable instruments are those you cannot transfer to some Give specific information about them	promissory notes, and money orders.
		Issuer name:	
21.		nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift sa	vings accounts, or other pension or profit-sharing plans
		List each account separately. Type of account: Institution	on name:
22.	Your sl Examp	y deposits and prepayments hare of all unused deposits you have made so that you may les: Agreements with landlords, prepaid rent, public utilities	continue service or use from a company (electric, gas, water), telecommunications companies, or others
	■ No □ Yes.	Institutio	on name or individual:
23.	Annuiti	es (A contract for a periodic payment of money to you, either	r for life or for a number of years)
	■ No □ Yes	Issuer name and description.	
24.	26 U.S.0	s in an education IRA, in an account in a qualified ABLE C. $\S\S 530(b)(1)$, $529A(b)$, and $529(b)(1)$.	program, or under a qualified state tuition program.
	■ No □ Yes	Institution name and description. Separately fi	le the records of any interests.11 U.S.C. § 521(c):
25.	Trusts, ■ No	equitable or future interests in property (other than any	thing listed in line 1), and rights or powers exercisable for your benefit
		Give specific information about them	
	Examp ■ No	s, copyrights, trademarks, trade secrets, and other intelledes: Internet domain names, websites, proceeds from royalti	
		Give specific information about them	
	Examp ■ No	es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative associ Give specific information about them	ation holdings, liquor licenses, professional licenses
M	oney or p	property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you	
		Give specific information about them, including whether you	already filed the returns and the tax years
	■ No		upport, maintenance, divorce settlement, property settlement

D	ebtor 1	David A. Kaufman	Case number (if known)	
30	Exam _l	amounts someone owes you oles: Unpaid wages, disability insurance payments, disability benefits; unpaid loans you made to someone else	benefits, sick pay, vacation pay, workers' compe	ensation, Social Security
	■ No □ Yes.	Give specific information		
31		ets in insurance policies bles: Health, disability, or life insurance; health savings acco	unt (HSA); credit, homeowner's, or renter's insura	unce
		Name the insurance company of each policy and list its value Company name:	ue. Beneficiary:	Surrender or refund value:
32	If you	terest in property that is due you from someone who has are the beneficiary of a living trust, expect proceeds from a lone has died.		ceive property because
	☐ Yes.	Give specific information		
33		against third parties, whether or not you have filed a la oles: Accidents, employment disputes, insurance claims, or		
	☐ Yes.	Describe each claim		
34	■ No	contingent and unliquidated claims of every nature, incl Describe each claim	uding counterclaims of the debtor and rights t	o set off claims
٥-				
35	. Any fin ■ No	ancial assets you did not already list		
	☐ Yes.	Give specific information		
36		he dollar value of all of your entries from Part 4, including the details of the details of the details		\$505.00
Pa	art 5: De	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real estate in Part 1.	
	Do you o	own or have any legal or equitable interest in any business-related	d property?	
	_	So to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interest In.	
46		own or have any legal or equitable interest in any farm-	- or commercial fishing-related property?	
	☐ Yes	. Go to line 47.		
Pa	art 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above	
53		I have other property of any kind you did not already list oles: Season tickets, country club membership	?	
	☐ Yes.	Give specific information		
54	4. Add t	he dollar value of all of your entries from Part 7. Write the	hat number here	\$0.00

Debtor 1 David A. Kaufman		Case number (if known)	
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$420,000.00
56. Part 2: Total vehicles, line 5	\$0.00		
57. Part 3: Total personal and household items, line 15	\$3,350.00		
58. Part 4: Total financial assets, line 36	\$505.00		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54 +	\$0.00		
62. Total personal property. Add lines 56 through 61	\$3,855.00	Copy personal property total	\$3,855.00
63. Total of all property on Schedule A/B . Add line 55 + line 62			\$423,855.00

Fil	l in this inform	nation to identify your case:							
De	btor 1	David A. Kaufman							
D -	h O	First Name	Middle Name	L	ast Name				
	btor 2 ouse if, filing)	First Name	Middle Name	L	ast Name				
Un	ited States Bar	nkruptcy Court for the: EAST	ERN DISTRICT OF N	FW Y	ORK				
0	niod Otatoo Bai				-				
	se number					☐ Check if this is an			
(11 K	nown					amended filing			
		_				<u> </u>			
<u>O</u> 1	fficial For	<u>rm 106C</u>							
S	chedule	e C: The Prope	rty You Cla	aim	as Exempt	4/16			
						or supplying correct information. Using u claim as exempt. If more space is			
nee	ded, fill out and	d attach to this page as many c				y additional pages, write your name			
	l case number (,							
						One way of doing so is to state a eing exempted up to the amount of			
any	applicable sta	atutory limit. Some exemption	ns—such as those for	r heal	th aids, rights to receive certain	benefits, and tax-exempt retirement			
					nption of 100% of fair market val	ue under a law that limits the nt, your exemption would be limited			
		statutory amount.	ie value of the proper	.y .o .	determined to exoced that amoun	ii, your exemption would be immed			
Pa	rt 1: Identify	y the Property You Claim as I	Exempt						
1.	Which set of	exemptions are you claiming	1? Check one only, eve	en if vo	our spouse is filing with you.				
	_	aiming state and federal nonbar	•	•	, ,				
	_	C	. , .	11 0.	5.6. § 522(6)(5)				
	■ You are cla	aiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
		on of the property and line on	Current value of the	Am	Specific laws that allow exemption				
	Scriedule A/B t	hat lists this property	portion you own Copy the value from	Copy the value from Check only one box for each exemption.					
			Schedule A/B		,				
		Vood Drive East Setauket,	\$420,000.00		\$11,837.50	11 U.S.C. § 522(d)(1)			
		Suffolk County nedule A/B: 1.1			100% of fair market value, up to				
	Line nom con	10 da 10 7 v 2			any applicable statutory limit				
	Minn Harri	-11-1 01				44.11.0.0.5.500(-1)(0)			
	Furnishings	ehold Goods and	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)			
		nedule A/B: 6.1			100% of fair market value, up to				
					any applicable statutory limit				
	Misc. Electr	onics	¢250.00		\$250.00	11 U.S.C. § 522(d)(3)			
		nedule A/B: 7.1	\$350.00		\$350.00	0.0.0. 3 0(0)			
					100% of fair market value, up to any applicable statutory limit				
	misc. firear	_	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)			
	Line from Sch	nedule A/B: 10.1							
					100% of fair market value, up to any applicable statutory limit				
					•				
	Misc. Weari	ing Apparel nedule A/B: 11.1	\$750.00		\$750.00	11 U.S.C. § 522(d)(3)			
	LINE HOIH SCH	ICUUIC A/D. II.I			100% of fair market value, up to				
					any applicable statutory limit				

Official Form 106C

Debtor	David A. Kaufman		Case number (if known)					
Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of portion you own		ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B						
	sc. Jewelry e from Schedule A/B: 12.1	\$250.00		\$250.00	11 U.S.C. § 522(d)(4)			
LIII	is non-editedate Add. 1211			100% of fair market value, up to any applicable statutory limit				
	ecking: Capital One (8350) from Schedule A/B: 17.1			\$500.00	11 U.S.C. § 522(d)(5)			
LIII	le Horri Schedule AVD. 17.1			100% of fair market value, up to any applicable statutory limit				
	e you claiming a homestead exemption ubject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cove No Yes	3 years after that for ca	ases f	,	,			

Fill in this info	rmation to identify you	ur case:				
Debtor 1	David A. Kaufm					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
, ,						
United States B	Sankruptcy Court for the	EASTERN DISTRICT OF NEV	V YORK			
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
Official For	m 106D					
		\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_			
Schedule	D: Creditors	Who Have Claims	Secure	a by Property	/	12/15
		f two married people are filing togethe				
known).	Additional Page, IIII it out	, number the entries, and attach it to t	ans iorin. On u	ne top of any additional pa	iges, write your name at	id case number (ii
1. Do any creditor	s have claims secured by	your property?				
☐ No. Che	ck this box and submit t	this form to the court with your othe	er schedules.	You have nothing else t	o report on this form.	
■ Yes. Fill	in all of the information	below.				
Part 1: List	All Secured Claims					
•		nore than one secured claim, list the cre	ditor congratoly	for Column A	Column B	Column C
each claim. If mo	re than one creditor has a p	particular claim, list the other creditors in			Value of collateral	Unsecured
as possible, list th	e claims in alphabetical ord	der according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Ditech F	inancial LLC	Describe the property that secures	the claim:	\$430,000.00	\$420,000.00	\$10,000.00
Creditor's Na	me	79 Willow Wood Drive East				
DO D	0470	Setauket, NY 11733 Suffolk	c County			
PO Box Rapid Ci		As of the date you file, the claim is:	Check all that			
57709-6 ²	• •	apply. Contingent				
Number, Stre	et, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the	debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		An agreement you made (such as car loan)	mortgage or see	cured		
Debtor 2 only						
Debtor 1 and [☐ Statutory lien (such as tax lien, me	chanic's lien)			
_	the debtors and another claim relates to a	☐ Judgment lien from a lawsuit	Mortgage			
community		Other (including a right to offset)	- Inortgago			
Date debt was in	curred	Last 4 digits of account num	her			
Date debt mae in						
Einsidle	r Management					
lnc.		Describe the property that secures		\$11,408.70	\$420,000.00	\$11,408.70
Creditor's Na	me	79 Willow Wood Drive East				
		Setauket, NY 11733 Suffolk	County			
PO Box	12557	As of the date you file, the claim is: apply.	Check all that			
Newark,	NJ 07101	Contingent				
Number, Stre	et, City, State & Zip Code	Unliquidated				
		Disputed				
_	debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as car loan)	mortgage or se	cured		
☐ Debtor 2 only ☐ Debtor 1 and [Debtor 2 only	☐ Statutory lien (such as tax lien, me	ochanio's liss)			
	the debtors and another	☐ Judgment lien from a lawsuit	orianilo s nenj			
	claim relates to a	 Other (including a right to offset) 	Condo Fe	es		
community o		Sales (moldaling a right to onset)				
Date debt was in	curred	Last 4 digits of account num	ber 79			

Official Form 106D

Debto	or 1 David A. Kaufman			Case number (if know)	
	First Name Mid	dle Name	Last Name		
Add	the dollar value of your entries	n Column A on this pa	nge. Write that number here:	\$441,408.70	
	s is the last page of your form, a e that number here:	dd the dollar value tota	als from all pages.	\$441,408.70	
Part 2	List Others to Be Notifie	d for a Debt That Yo	ou Already Listed		
to coll	ect from you for a debt you owe	to someone else, list t	the creditor in Part 1, and the	you already listed in Part 1. For examen list the collection agency here. Simou do not have additional persons to	ilarly, if you have more than one
	Name, Number, Street, City, Stat Board of Manaers of	& Zip Code	(On which line in Part 1 did you enter the	creditor? 2.2
	Willow Wood Condomir 400 Corporate Plaza Islandia, NY 11749	ium	I	ast 4 digits of account number	
	13101010, 141 11743				
	Name, Number, Street, City, Stat Cohen Warren Meyer &	& Zip Code	C	On which line in Part 1 did you enter the	creditor?
	Gitter, P.C. 80 Maple Avenue PO Box 768 Smithtown, NY 11787-0	768	I	_ast 4 digits of account number	
	Name, Number, Street, City, Stat Dara Martin Orlando, Es		C	On which line in Part 1 did you enter the	creditor? 2.1
	Referee 330 Motor Parkway	1	l	ast 4 digits of account number	
	Suite 400 Hauppauge, NY 11788				
	Name, Number, Street, City, Stat		(On which line in Part 1 did you enter the	creditor? 2.1
	Frenkel, Lambert, Weiss Weisman & Gordon, LLI 53 Gibson Street	•	I	_ast 4 digits of account number	
	Bay Shore, NY 11706				
	Name, Number, Street, City, Stat Willow Wood @ East	e & Zip Code	(On which line in Part 1 did you enter the	creditor? 2.2
	Setauket PO box 40 Blue Point, NY 11715		l	_ast 4 digits of account number	

Fill in this inform	ation to identify your	case:						
Debtor 1	David A. Kaufmar							
200101	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ban	kruptcy Court for the:	EASTERN DISTRI	CT OF NEW YORK					
Case number								
(if known)					_	if this is an led filing		
Official Forms	4005/5							
Official Form Schedule F/		ho Have Uns	ecured Claims			12/15		
any executory contra Schedule G: Executo D: Creditors Who Ha the Continuation Pag number (if known).	cts or unexpired leases to try Contracts and Unexpire Claims Secured by Property to this page. If you have	hat could result in a cl red Leases (Official Fo operty. If more space i e no information to rep	ith PRIORITY claims and Part 2 aim. Also list executory contrac rm 106G). Do not include any cr s needed, copy the Part you nee oort in a Part, do not file that Par	cts on Schedule A/B: Pro reditors with partially se ed, fill it out, number the	operty (Official Form cured claims that are entries in the boxes	106A/B) and on listed in Schedule on the left. Attach		
	of Your PRIORITY Un							
1. Do any creditors No. Go to Pai	s have priority unsecured	claims against you?						
Yes.	11 2.							
1. If more than or	ne creditor holds a particula	ar claim, list the other cre	or's name. If you have more than teditors in Part 3.	wo priority unsecured clai	ms, fill out the Continu Priority amount	Nonpriority amount		
2.1 Internal I	Revenue Service	Last 4 dio	its of account number	\$200,000.0 0	\$200,000.00	\$0.00		
Priority Cred			s the debt incurred?		· · · ·	<u> </u>		
PO Box 7 Philadel	7317 ohia, PA 19101-731		s the debt incurred?		-			
Number Stre	eet City State Zlp Code		date you file, the claim is: Check	k all that apply				
_	the debt? Check one.	☐ Contin	gent					
Debtor 1 on	ly	☐ Unliqu	idated					
Debtor 2 on	ly	☐ Disput	ed					
Debtor 1 and	d Debtor 2 only	Type of P	RIORITY unsecured claim:					
☐ At least one	of the debtors and anothe	Dome:	stic support obligations					
☐ Check if thi	s claim is for a commun	ity debt Taxes	and certain other debts you owe t	he government				
Is the claim su	bject to offset?	☐ Claims	for death or personal injury while	you were intoxicated				
■ No		☐ Other.				-		
☐ Yes			2005 taxes					
Part 2: List All	of Your NONPRIORIT	Y Unsecured Claim	s					
3. Do any creditors	s have nonpriority unsec	ured claims against yo	u?					
☐ No. You have	☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.							
Yes.								
4. List all of your n	onpriority unsecured cla	ims in the alphabetica	order of the creditor who holds	s each claim. If a creditor	has more than one no	onpriority unsecured		

claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor	1 David A. Kaufman		Case number (if know)				
4.1	AMCA Nonpriority Creditor's Name	Last 4 digits of account number	4721	\$456.00			
	PO Box 1235 Elmsford, NY 10523-0935	When was the debt incurred?	2016				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent ☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:				
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Collection					
4.2	Capital One Bank (USA) NA	Last 4 digits of account number	7376	\$3,765.38			
	Nonpriority Creditor's Name PO Box 71083 Charlotte, NC 28272-1083	When was the debt incurred?	2016				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_	,				
	Debtor 1 only	☐ Contingent ☐ Unliquidated					
	☐ Debtor 2 only	·					
	☐ Debtor 1 and Debtor 2 only	Disputed	Type of NONPRIORITY unsecured claim:				
	☐ At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharin					
	Yes	Other. Specify Credit Card	<u>.</u>				
4.3	Capital One Bank (USA) NA	Last 4 digits of account number	6770	\$5,683.81			
	Nonpriority Creditor's Name						
	PO Box 71083 Charlotte, NC 28272-1083	When was the debt incurred?	2016				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	По и					
	Debtor 1 only	Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured					
	☐ At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other Specify Credit Card					

Debtor 7	David A. Kaufman		Case number (if know)				
4.4	Catholic Health Services Nonpriority Creditor's Name PO Box 95000-6525	Last 4 digits of account number When was the debt incurred?	<u>0712</u> 2016	\$1,020.00			
	PO Box 95000-6525 Philadelphia, PA 19195-6525 Number Street City State Zlp Code	As of the date you file, the claim					
	Who incurred the debt? Check one.	☐ Contingent	із: Спеск ан тагарру				
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	■ Other. Specify Medical Bi	<u> </u>				
	MRS Associates	Last 4 digits of account number	0983	\$0.00			
	Nonpriority Creditor's Name 1930 Olney Ave Cherry Hill, NJ 08003	When was the debt incurred?	2016				
	Number Street City State Zlp Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:				
	☐ At least one of the debtors and another	☐ Student loans	d Glaini.				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Is the claim subject to offset?						
	■ No	Debts to pension or profit-sharing					
	Yes	■ Other. Specify For Noticing Purpose Only/ Catholic health Services of Long Island					
	Nassau University	Last 4 digits of account number	0220	\$7,937.30			
	Nonpriority Creditor's Name Medical Center ER	When was the debt incurred?	2011				
	PO Box 30749 New York, NY 10087						
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	Contingent					
	Debtor 1 only	□ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community debt Is the claim subject to offset?						
	■ No						
	☐ Yes	■ Other Specify Medical Bi	П				

Debto	r 1 David A. Kaufman		Case number (if know)				
4.7	Pro Bill	Last 4 digits of account number	9273	\$654.00			
	Nonpriority Creditor's Name Po Box 2078 Huntington, WV 25720	When was the debt incurred?	2014				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	По и					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
		☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Collection					
4.8	Professional Claims	Last 4 digits of account number	0712	\$1,020.00			
	Nonpriority Creditor's Name Bureau, Inc.	When was the debt incurred?	2014				
	PO Box 9060	When was the dest meaned.	2014				
	Hicksville, NY 11802-9060						
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	□ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharin					
	Yes	■ Other. Specify Collection					
4.9	Stony Brook Medicine	Last 4 digits of account number	0811	\$5,411.37			
	Nonpriority Creditor's Name 101 Nicolls Road	When was the debt incurred?	2014				
	Stony Brook, NY 11794-8191 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_	c. Chook all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	•	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured					
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other. Specify Medical Bi	II				

Debtor	David A.	Kaufman		Case n	number (if know)				
4.10	Sunrise Cre		Last 4 digits of account number	9131		\$342.96			
	Services, In		When was the debt incurred?	2014		_			
	PO Box 910	•							
		e, NY 11735-9100 City State Zlp Code	As of the date you file, the claim	is: Check	all that apply				
		he debt? Check one.	_		an area oppry				
	■ Debtor 1 onl	v	Contingent						
	Debtor 2 onl	v	Unliquidated						
	Debtor 1 and	•	Disputed						
	_	of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	_	s claim is for a community debt	☐ Student loans						
		bject to offset?	☐ Obligations arising out of a separeport as priority claims	aration ag	reement or divorce that you did not				
	■ No	.,	Debts to pension or profit-sharing	na plans, a	and other similar debts				
	☐ Yes		_	31, -					
	□ 163		Other. Specify Collection			-			
4.11	Synchrony	Bank - PC Richa	Last 4 digits of account number	3398		\$500.00			
	Nonpriority Cred		.		<u>. </u>				
	PO Box 960 Orlando, FL		When was the debt incurred?	2017		-			
		City State Zlp Code	As of the date you file, the claim	is: Check	all that apply				
	Who incurred t	he debt? Check one.	☐ Contingent						
	Debtor 1 onl	у	☐ Unliquidated						
	☐ Debtor 2 onl	у	□ Disputed						
	Debtor 1 and	d Debtor 2 only	Type of NONPRIORITY unsecure	d claim:					
	☐ At least one	of the debtors and another	☐ Student loans						
☐ Check if this claim is for a community debt Is the claim subject to offset?			☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No		☐ Debts to pension or profit-sharing	ng plans, a	and other similar debts				
	☐ Yes		■ Other. Specify Credit Care	d					
	00		Other. Specify			-			
Part 3:	List Others	s to Be Notified About a Debt T	hat You Already Listed						
trying more	to collect from than one creditoebts in Parts 1 o	you for a debt you owe to someone	else, list the original creditor in Pa d in Parts 1 or 2, list the additional ge.	rts 1 or 2	y listed in Parts 1 or 2. For example, t, then list the collection agency her here. If you do not have additional	e. Similarly, if you have			
	the amounts of o	certain types of unsecured claims.	This information is for statistical re	porting p	ourposes only. 28 U.S.C. §159. Add t	the amounts for each type			
					Total Claim				
	6a.	Domestic support obligations		6a.	\$ 0.00				
Total cl						_			
from P	'art 1 6b. 6c.	Taxes and certain other debts you Claims for death or personal injur	=	6b. 6c.	\$ <u>200,000.00</u> \$ 0.00				
	6d.	Other. Add all other priority unsecu	•	6d.	\$ <u>0.00</u> \$ 0.00				
		, , , , , , , , , , , , , , , , , , ,			0.00	_			
	6e.	Total Priority. Add lines 6a through	6d.	6e.	\$ 200,000.00	_			
					Total Claim				
	6f.	Student loans		6f.	\$ 0.00				
Total cl		Obligations and the state	-ti	_		_			
from P	'art 2 6g.	Obligations arising out of a separ did not report as priority claims	ation agreement or divorce that yo	u 6g.	\$0.00	_			
	6h.	Debts to pension or profit-sharing	•	6h.	\$ 0.00	_			
	6i.	Other. Add all other nonpriority unse	ecured claims. Write that amount here	e. 6i.	\$ 26,790.82	=			

6j.

Total Nonpriority. Add lines 6f through 6i.

26,790.82

Debtor 1	David A. Kaufman	Case number (if know)	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Fill in this infor	rmation to identify your	case:		
Debtor 1	David A. Kaufmai	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Chrysler Capital-Lease	2015 Jeep
PO Box 660647	Account #: 1418472
Dallas, TX 75266-0647	\$525/mo

Official Form 106G

Fill in this inf	ormation to identify yo	our case:		
Debtor 1	David A. Kaufr			
Johtor O	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States	Bankruptcy Court for the	e: EASTERN DISTRICT O	F NEW YORK	
Case number				
f known)				Check if this is an
				amended filing
Official F	orm 106H			
Schedul	le H: Your Co	debtors		12/1:
70110441				1271
1. Do you	have any codebtors?	(If you are filing a joint case,	do not list either spous	e as a codebtor.
■ No				
■ No □ Yes				
	the lead Owner have			
		you lived in a community pi na, Nevada, New Mexico, Pu		pry? (Community property states and territories include hington, and Wisconsin.)
■ N= O=	ta Para O			
■ No. Go		pouse, or legal equivalent live	e with you at the time?	
	au your opouce, remier e	pouce, et logal oquitalent int	o man you at the time.	
				or if your spouse is filing with you. List the person sh
				e sure you have listed the creditor on Schedule D (Off 106G). Use Schedule D, Schedule E/F, or Schedule G
fill out Co	olumn 2.			
	umn 1: Your codebtor			Column 2: The creditor to whom you owe the de
Name	e, Number, Street, City, State ar	d ZIP Code		Check all schedules that apply:
3.1				☐ Schedule D, line
Nam	е			☐ Schedule E/F, line
				☐ Schedule G, line
Num	ber Street			<u> </u>
City		State	ZIP Code	
3.2				□ Schodulo D. lino
Nam	e			□ Schedule D, line □ Schedule E/F, line
				☐ Schedule G, line
Num	ber Street			
City	S. Ollect	State	ZIP Code	

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Fill	in this information to ic	dentify your ca	ase.									
		avid A. Kaı										
	otor 2						_					
Uni	ted States Bankruptcy	Court for the	EASTERN DISTRICT	OF NEW YO	ORK		_					
(If kn	se number							□ A		ed filing ent sho	l owing postpetiting the following dat	
	fficial Form 1							N	1M / DD/ `	YYYY		
	chedule I: Yo											12/15
sup spo	plying correct inform use. If you are separa ch a separate sheet to	ation. If you ated and you o this form. (ible. If two married pec are married and not fili r spouse is not filing w On the top of any additi	ng jointly, ar ith you, do n	nd your spo ot include	use infor	is liv mati	ing with	n you, inc It your sp	lude in ouse. I	nformation abo If more space	out your is needed,
1.	Fill in your employr information.	nent		Debtor 1					Debtor	2 or no	n-filing spous	е
	If you have more tha			■ Employed					☐ Employed			
	attach a separate pa information about ad		Employment status	☐ Not emp	☐ Not employed				☐ Not employed			
	employers.		Occupation	Welder								
	Include part-time, se self-employed work.	asonal, or	Employer's name	TT mecha	anical Cor	p.						
	Occupation may inclor homemaker, if it a		Employer's address		9th Street , NY 11378							
			How long employed the	here? _4	4 mo.				_			
Par	t 2: Give Detail	s About Mon	thly Income									
Esti			ate you file this form. If	you have not	hing to repo	ort for	any	line, writ	e \$0 in th	e space	e. Include your	non-filing
•	u or your non-filing spo e space, attach a sepa		ore than one employer, co	ombine the in	formation fo	or all e	empl	oyers fo	that pers	on on t	he lines below.	If you need
								For Del	btor 1		Debtor 2 or a-filing spouse	
2.			ry, and commissions (becalculate what the month			2.	\$		0.00	\$	N/A	<u> </u>
3.	Estimate and list m	onthly overti	me pay.			3.	+\$		0.00	+\$	N/A	<u> </u>
4.	Calculate gross Inc	ome. Add lin	e 2 + line 3.			4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debtor 1	David A. Kaufman		Case r	umber (if known)			
			For		or Debto		
Co	ppy line 4 here	4.	\$	0.00		N/A	_
5. Li :	st all payroll deductions:						
5a		5a.	\$	0.00 \$;	N/A	
5b	•	5b.	\$	0.00		N/A	_
50	· · · · · · · · · · · · · · · · · · ·	5c.	\$	0.00 \$		N/A	
50	Required repayments of retirement fund loans	5d.	\$	0.00 \$		N/A	_
5e	. Insurance	5e.	\$	0.00 \$		N/A	_
5f.		5f.	\$	0.00		N/A	
5g		5g.	\$	0.00 \$		N/A	_
5h	Other deductions. Specify:	_ 5h.+	\$	0.00 + \$		N/A	_
6. A c	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00		N/A	_
7. C a	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00		N/A	_
8. Li : 8a	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		•				
O.L.	monthly net income.	8a.	\$	0.00 \$		N/A	_
8b 8c		8b.	Ψ	0.00\$		N/A	_
	settlement, and property settlement.	8c.	\$	0.00 \$		N/A	_
80		8d.	\$	0.00		N/A	
8e	•	8e.	\$	0.00		N/A	_
8f.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$	0.00_ \$		N/A	_
89		8g.	\$	0.00 \$		N/A	_
8h	Other monthly income. Specify: 1099 Business Income	_ 8h.+	\$	5,200.00 + \$	·	N/A	_
9. A c	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5,200.00		N/A	A
10 C :	alculate monthly income. Add line 7 + line 9.	10. \$	5	,200.00 + \$	N/A]= \$	5,200.00
	dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	· · · · • -		, <u>,200.00</u> . [©]	11/7	┤	3,200.00
11. St Incotl Do	ate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your ner friends or relatives. onot include any amounts already included in lines 2-10 or amounts that are not a pecify:	depen	•	,	in <i>Schedu</i>	ile J. +\$	0.00
W	dd the amount in the last column of line 10 to the amount in line 11. The res rite that amount on the Summary of Schedules and Statistical Summary of Certain plies			,		\$	5,200.00
13 D	o you expect an increase or decrease within the year after you file this form?	2				Combi month	ned ly income
13. DC	No.	f 					

Official Form 106I Schedule I: Your Income page 2

Debtor 1 David A. Kaufman Check if this is:	
☐ An amended filing	
	wing postpetition chapter the following date:
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK MM / DD / YYYY	
United States Bankrupicy Court for the. EASTERN DISTRICT OF NEW YORK	
Case number (If known)	
Official Form 106J	
Schedule J: Your Expenses	12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible f information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write number (if known). Answer every question.	
Part 1: Describe Your Household	
1. Is this a joint case?	
■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?	
□ No	
☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.	
2. Do you have dependents? ■ No	
Do not list Debtor 1	Does dependent live with you?
Do not state the	□ No
dependents names.	☐ Yes
	□ No □ Yes
	□ No
	Yes
	□ No
3. Do your expenses include	☐ Yes
expenses of people other than yourself and your dependents?	
Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Che expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the standard of the supplemental schedule of the	apter 13 case to report of the form and fill in the
applicable date.	
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income	
(Official Form 106l.)	enses
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$	0.00
If not included in line 4:	
4a. Real estate taxes 4a. \$	0.00
4b. Property, homeowner's, or renter's insurance 4b. \$	0.00
4c. Home maintenance, repair, and upkeep expenses 4c. \$	0.00
4d. Homeowner's association or condominium dues 4d. \$ 5. Additional mortgage payments for your residence, such as home equity loans 5. \$	385.00 0.00

David A. Kaufman	ase numl	ber (if known)	
ies:			
	6a.	\$	370.00
Water, sewer, garbage collection	6b.	\$	0.00
Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	150.00
Other. Specify: Cell Phone	6d.	\$	125.00
	_ _{7.}	\$	925.00
· ·	8.	\$	0.00
ning, laundry, and dry cleaning	9.	\$	25.00
onal care products and services	10.	\$	75.00
	11.	\$	200.00
sportation. Include gas, maintenance, bus or train fare.			
ot include car payments.		·	250.00
rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
itable contributions and religious donations	14.	\$	50.00
		_	
		·	0.00
			1,638.43
			264.95
	15d.	\$	0.00
	40	Φ.	
	_ 16.	\$	0.00
	170	¢	E0E 00
' '		*	525.00
• •		· -	0.00
	_		0.00
	_ 170.	Φ	0.00
	18.	\$	0.00
		·	0.00
	19.		0.00
		our Income.	
			0.00
	20b.	\$	0.00
Property, homeowner's, or renter's insurance		·	0.00
		· · · · · · · · · · · · · · · · · · ·	0.00
		· -	0.00
		·	100.00
· · · · · · · · · · · · · · · · · · ·			100.00
•			5,183.38
Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
Add line 22a and 22b. The result is your monthly expenses.		\$	5,183.38
ulata varia manthir nat incoma			
	220	¢	E 200 00
• • •			5,200.00
Copy your monthly expenses from line 22c above.	230.	-\$	5,183.38
Subtract your monthly expenses from your monthly income			
	23c.	\$	16.62
The result is your monding not moonto.			
			on or dooroon because (
ample, do you expect to finish paying for your car loan within the year or do you expect your more	rigage pa	ayment to increas	be or decrease decause of a
CATION TO THE TERMS OF VOUR MORTGAGE?			
cation to the terms of your mortgage? D.			
ti dohisiserro eca ruece e uno co	ties: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cell Phone d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning conal care products and services ical and dental expenses susportation. Include gas, maintenance, bus or train fare. of include car payments. ritainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. of include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Wehicle insurance Other insurance, specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20. sify: allment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: r payments of allmony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule I, Your Income (Official Form 106I). For payments you make to support others who do not live with you. Sify: Froperty, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Frosperfy: Misc. Pet & Vet Expenses ulate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. ulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. Subtract your monthly expenses from line 22c above. Subtract your monthly expenses from line 22c above. Subtract your monthly expenses from your expenses within the year after you	Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cell Phone da and housekeeping supplies dare and children's education costs hing, laundry, and dry cleaning gonal care products and services icial and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. ritable contributions and religious donations 14. rance. Other insurance 15c. Other insurance 15c. Other insurance. Specify: 15d. 15d.	Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other, Specify: Cell Phone da and housekeeping supplies 7. \$ darear and children's education costs 8. \$ shing, laundry, and dry cleaning 9. \$ conal care products and services 10. \$ ical and dental expenses 11. \$ sportation. Include gas, maintenance, bus or train fare. ot include care payments. 12. \$ ott include care payments. 13. \$ ratiable contributions and religious donations 14. \$ rance. oto tinclude in isurance deducted from your pay or included in lines 4 or 20. Life insurance 15b. \$ Vehicle insurance specify 15c. \$ s. Do not include taxes deducted from your pay or included in lines 4 or 20. Sify: Ialment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other, Specify: r payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule 1, Your Income (Official Form 106). The specify: r payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule 1, Your Income (Official Form 106). The specify: r payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule 1, Your Income (Official Form 106). The specify: r payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule 1, Your Income (Official Form 106). The real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. Real estate taxes Properly, homeowner's, or renter's insurance Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add lines 22 and 22b. The result is your monthly expenses. Subtract your monthly expenses from line 22c above. Subtract your monthly expenses from line 22c above. Subtract your monthly expenses from your expenses within th

Fill in this in	nformation to identify your	case:				
Debtor 1	David A. Kaufmar					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)) First Name	Middle Name	Last Name			
United State	s Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK			
Case numbe	er				☐ Check if this is an amended filing	
	orm 106Dec ration About a	n Individual	Debtor's Sch	edules	12/15	5
obtaining mo years, or bot		n connection with a bank			tement, concealing property, or 00, or imprisonment for up to 20	
Did you	u pay or agree to pay some	one who is NOT an attor	ney to help you fill out banl	kruptcy forms?		
■ No	0					
☐ Ye	es. Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)	1
	penalty of perjury, I declare by are true and correct.	that I have read the sum	mary and schedules filed w	vith this declarati	ion and	
	David A. Kaufman		X			
	vid A. Kaufman nature of Debtor 1		Signature of Del	btor 2		
Dat	e June 27, 2017		Date			

Official Form 106Dec

Fill in	this inform	ation to identify you	r case:			
Debto	r 1	David A. Kaufma	an			
		First Name	Middle Name	Last Name		
Debto	r 2 if, filing)	First Name	Middle Name	Last Name		
United	l States Ban	kruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Case i	number n)				_	Check if this is an imended filing
	cial For ement		Affairs for Individ	luals Filing for B	ankruptcy	4/10
nform numbe	ation. If mo	ore space is needed,). Answer every ques	attach a separate sheet to stion.	this form. On the top of an	e equally responsible for su yy additional pages, write yo	
Part 1	Give De	etails About Your Ma	rital Status and Where You	Lived Before		
ı. W	hat is your	current marital statu	ıs?			
	l Married					
	Not marri	ied				
2. Di	l No		lived anywhere other than	·		
	Yes. List	all of the places you I	ived in the last 3 years. Do n	ot include where you live nov	N.	
D	ebtor 1 Prid	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
					nity property state or territorico, Texas, Washington and V	
	l No					
	l Yes. Mak	ke sure you fill out Scl	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explain	the Sources of You	r Income			
Fi	II in the total	amount of income yo	nployment or from operatir u received from all jobs and have income that you receiv	all businesses, including par		endar years?
_		in the details.				
	Yes. Fill i					
	I Yes. Fill i		Debtor 1		Debtor 2	
	I Yes. Fill i		Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From	January 1 c	of current year until for bankruptcy:	Sources of income	(before deductions and	Sources of income	(before deductions

Official Form 107

Debtor 1 David A. Kaufman Case number (if known)												
5.					uring this year or the that income is taxable				port; Social S	Security,		
unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debto												
	List each source and the gross income from each source separately. Do not include income that you listed in line 4.											
	■ No □ Yes. Fill in the details.											
				S	ebtor 1 ources of income escribe below.	eacl (bef	ss income from h source ore deductions and usions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)		
Par	rt 3:	List	Certain Pa	ayments You Ma	ade Before You Filed	for Bankru	ıptcy					
6.	_	either No.	Neither D	ebtor 1 nor Deb	debts primarily consu tor 2 has primarily co rsonal, family, or hous	onsumer d	ebts. Consumer de	ebts are defined in 1	1 U.S.C. § 10	01(8) as "incurred by an		
			During the	90 days before Go to line 7.	you filed for bankrupto	y, did you p	pay any creditor a to	otal of \$6,425* or mo	ore?			
☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payment paid that creditor. Do not include payments for domestic support obligations, such as child so not include payments to an attorney for this bankruptcy case.							yments and thild support a	nents and the total amount you ld support and alimony. Also, do				
	* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.									ıt.		
		Yes.			2 or both have primarily consumer debts. before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?							
			No.	Go to line 7.								
			□ Yes	include payme		ort obligatio			nt you paid that creditor. Do not y. Also, do not include payments to			
	Cred	ditor'	s Name an	d Address	Dates of pa	yment	Total amount paid	Amount you still owe	Was this p	payment for		
7.	 Within 1 year before you filed for Insiders include your relatives; any corporations of which you are and including one for a business you of support and alimony. 				neral partners; relative er, director, person in d	es of any ge control, or o	neral partners; part wner of 20% or mo	nerships of which your re of their voting sec	ou are a gene curities; and a	eral partner; any managing agent,		
		_ 110		er.								
	Insid	der's	Name and	Address	Dates of pa	yment	Total amount paid	Amount you still owe	Reason fo	or this payment		
8.	With insid		ear before	you filed for ba	ınkruptcy, did you ma	ake any pa	yments or transfe	r any property on a	eccount of a	debt that benefited an		
	_		yments on	debts guarantee	d or cosigned by an in	sider.						
		No Yes.	List all payr	ments to an insid	er							
	Insi	der's	Name and	Address	Dates of pa	yment	Total amount paid	Amount you still owe		or this payment editor's name		

Deb	otor 1	David A. Kaufman		Case number	(if known)						
Par	t 4:	dentify Legal Actions, Repossession	s, and Foreclosures								
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.										
		0									
	■ Ye	es. Fill in the details.									
	Case title Case number		Nature of the case Court or agency		Status of	Status of the case					
	Diete Tree S Kaum Trade Radzi Willow Unite Rever	ch Financial LLC f/k/a Green Servicing LLC v. David A. nan, Manufacturers and ers Trust Company, Denise insky, Board of Managers of w Wood Condominium, d States of America - Internal nue Service, People of the of New York	Foreclosure	Supreme Court, Suffolk County	■ Pendir □ On ap □ Conclu	peal					
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.										
	Creditor Name and Address		Describe the Property		Date	Value of the					
			Explain what happened		24.0	property					
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.										
	Creditor Name and Address		Describe the action the creditor took		Date action was taken	Amount					
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?										
	■ No										
Par	t 5: L	ist Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift.										
		with a total value of more than \$600	Describe the gifts		Dates you gave the gifts	Value					
	Perso Addre	n to Whom You Gave the Gift and ess:									
14.	■ No										
		es. Fill in the details for each gift or cont		a a maturilla costa al	Detec very	17-7					
	more t	or contributions to charities that tota than \$600 ty's Name SS (Number, Street, City, State and ZIP Code)	Il Describe what you	contributed	Dates you contributed	Value					

Deb	otor 1	David A. Kaufman		Case number (if known)							
Davi	4 C-	List Contain Lacon									
Par	τ 6:	List Certain Losses									
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?										
		No									
	_	es. Fill in the details.									
			Describ	ribe any insurance coverage for the loss		Date of your	Value of property				
				the amount that insurance has paid. Light insurance claims on line 33 of Scheduy.	loss	lost					
Par	t 7:	List Certain Payments or Transfer	S								
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.										
		Ю									
	■ Y	es. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Macco & Stern, LLP 2950 Express Drive South Suite 109 Islandia, NY 11749		You	Description and value of any property transferred		Date payment or transfer was made	Amount of payment				
				For services rendered in connewith this instant filing \$1,500.00 fee \$335.00. See 2016(b) Statemattached.	6/21/17	\$1,000.00					
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.										
	☐ Yes. Fill in the details.										
	Person Who Was Paid Address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment					
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.										
	Person Who Received Transfer Address Person's relationship to you			Description and value of Describe a		, p p	Date transfer was				
					received or debts change	made					
10	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a										
19.	benef	iciary? (These are often called asse			eit-settiea tru	st or similar device	or wnich you are a				
	Yes. Fill in the details.					Data Transfer					
	Name of trust						Date Transfer was				

In	ithin 1 year before you filed for bankrupold, moved, or transferred? clude checking, savings, money marke ouses, pension funds, cooperatives, as No Yes. Fill in the details.	t, or other financial acco	ounts; certificates of depo	•	•
Α	lame of Financial Institution and ddress (Number, Street, City, State and ZIP ode)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
P	CitiBank PO Box 183051 Columbus, OH 43218-3051	хххх-6973	■ Checking □ Savings □ Money Market □ Brokerage □ Other	2016	\$0.00
	o you now have, or did you have within ish, or other valuables? No Yes. Fill in the details.	1 year before you filed	for bankruptcy, any safe o	deposit box or other depo	ository for securities,
	lame of Financial Institution ddress (Number, Street, City, State and ZIP Code)	Who else had a Address (Number State and ZIP Code)	r, Street, City,	e the contents	Do you still have it?
2. H a	ave you stored property in a storage un	it or place other than yo	our home within 1 year be	fore you filed for bankrup	otcy?
	Yes. Fill in the details.				
N	Yes. Fill in the details. lame of Storage Facility ddress (Number, Street, City, State and ZIP Code	Who else has o to it? Address (Number State and ZIP Code)	r, Street, City,	e the contents	Do you still have it?
N A	lame of Storage Facility ddress (Number, Street, City, State and ZIP Code)	to it? Address (Number State and ZIP Code)	r, Street, City,	e the contents	
Part 9	lame of Storage Facility ddress (Number, Street, City, State and ZIP Code)	to it? Address (Number State and ZIP Code) rol for Someone Else	r, Street, City,		have it?
Part 9	lame of Storage Facility ddress (Number, Street, City, State and ZIP Code) Identify Property You Hold or Control o you hold or control any property that	to it? Address (Number State and ZIP Code) rol for Someone Else	r, Street, City,		have it?

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

David A. Kaufman Debtor 1 Case number (if known) 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business

27.	Within 4 years before you filed for bankru	ptcy, did you own a business or have any c	of the following connections to any business?			
	☐ A sole proprietor or self-employed	I in a trade, profession, or other activity, eit	her full-time or part-time			
	☐ A member of a limited liability con	npany (LLC) or limited liability partnership	(LLP)			
	☐ A partner in a partnership	☐ A partner in a partnership				
	☐ An officer, director, or managing €	executive of a corporation				
☐ An owner of at least 5% of the voting or equity securities of a corporation						
	No. None of the above applies. Go to	Part 12.				
	☐ Yes. Check all that apply above and f	ill in the details below for each business.				
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.			
	(Number, Street, City, State and ZIP Code)	Imber, Street, City, State and ZIP Code) Name of accountant or bookkeeper				

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Dates business existed

No

☐ Yes. Fill in the details below.

Name Address

(Number, Street, City, State and ZIP Code)

Date Issued

Debtor 1	David A. Kaufman	Case number (if known)
Part 12:	Sign Below	
are true a with a bar		ffairs and any attachments, and I declare under penalty of perjury that the answers tement, concealing property, or obtaining money or property by fraud in connection, or imprisonment for up to 20 years, or both.
/s/ Davi	d A. Kaufman	
	. Kaufman e of Debtor 1	Signature of Debtor 2
Date J	une 27, 2017	Date
Did you a ■ No □ Yes	ttach additional pages to Your Statement of Fir	nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you p ■ No	ay or agree to pay someone who is not an attor	ney to help you fill out bankruptcy forms?
☐ Yes. N	ame of Person Attach the Bankruptcy Peti	ition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor 1		mation to identify your	case:			
Debtor 2 (Square A tiling) First Name Midde Name Last Name L	Debtor 1	David A. Kaufmar	n			
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number (If thrown) Check if this is an armended filling Check if this is an armended	Dobtor 2	First Name	Middle Name	Last Name		
Case number Check if this is an amended filing Check if this is an amended filing Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: If creditors have claims secured by your property, or If you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form of the form. If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Partitle: List Your Creditors Who Have Secured Claims I. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral what do you intend to do with the property as exempt on Schedule C? Creditor's Ditech Financial LLC Surrender the property. No Retain the property and enter into a Retain the prope		First Name	Middle Name	Last Name		
Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. Four must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Parties List Your Creditors Who Have Secured Claims It. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? Creditor's Ditech Financial LLC aname: Pescription of 79 Willow Wood Drive East Setauket, NY 11733 Suffolk County Bescription of 79 Willow Wood Drive East Setauket, NY 11733 Suffolk County Setauket, NY 11733 Suffolk Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. R	United States Ba	ankruptcy Court for the:	EASTERN DISTR	RICT OF NEW YORK		
Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. Four must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Parties List Your Creditors Who Have Secured Claims It. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? Creditor's Ditech Financial LLC aname: Pescription of 79 Willow Wood Drive East Setauket, NY 11733 Suffolk County Bescription of 79 Willow Wood Drive East Setauket, NY 11733 Suffolk County Setauket, NY 11733 Suffolk Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. Retain the property and enter into a Realimmation Agreement. R	C					
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Description of property Setauket, NY 11733 Suffolk securing debt: Creditor's Einsidler Management Inc. name: Description of property Setauket, NY 11733 Suffolk Security Creditor's Einsidler Management Inc. name: Description of property Setauket, NY 11733 Suffolk Security Retain the property and redeem it. Surrender the property. Retain the property. Retain the property and redeem it.	Part 1: List You 1. For any credit information be	our name and case numour Creditors Who Have ors that you listed in Pa elow.	mber (if known). e Secured Claims art 1 of Schedule I	D: Creditors Who Have Claims Secured What do you intend to do with the pr	by Property (Offic	ial Form 106D), fill in the
Description of property Setauket, NY 11733 Suffolk Securing debt: Creditor's Einsidler Management Inc. name: Description of property Descriptio	Part 1: List You 1. For any credit information be	our name and case numour Creditors Who Have ors that you listed in Pa elow.	mber (if known). e Secured Claims art 1 of Schedule I	D: Creditors Who Have Claims Secured What do you intend to do with the pr	by Property (Offic	ial Form 106D), fill in the
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County	Part 1: List You 1. For any credit information be identify the creditor's name: Description of property securing debt: Creditor's name:	our name and case numour Creditors Who Have ors that you listed in Paelow. editor and the property to Ditech Financial LLC 79 Willow Wood Down Setauket, NY 1173. County	mber (if known). e Secured Claims art 1 of Schedule I that is collateral rive East 3 Suffolk	D: Creditors Who Have Claims Secured What do you intend to do with the presecures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Retain Surrender the property. Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a	by Property (Offic operty that E	ial Form 106D), fill in the Did you claim the property s exempt on Schedule C? No Yes
Netalli	Part 1: List You 1. For any credit information be Identify the creditor's name: Description of property securing debt: Creditor's Ename: Description of	our name and case numour Creditors Who Have ors that you listed in Paelow. editor and the property to bitech Financial LLC 79 Willow Wood Do Setauket, NY 1173. County Cinsidler Managemen	mber (if known). e Secured Claims art 1 of Schedule I that is collateral rive East 3 Suffolk at Inc. rive East	D: Creditors Who Have Claims Secured What do you intend to do with the presecures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain Surrender the property and [explain]: Retain Surrender the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	by Property (Offic operty that E	ial Form 106D), fill in the Did you claim the property s exempt on Schedule C? No Yes
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You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Describe your unexpired personal property leases

Det	otor 1 David	A. Kaufman	Case number (if known)
Les	ssor's name:	Chrysler Capital-Lease	□ No
			■ Yes
Des	scription of leas	ed 2015 Jeep	
Pro	perty:	Account #: 1418472 \$525/mo	
Par	t 3: Sign Be	low	
		perjury, I declare that I have indicated m bject to an unexpired lease.	rintention about any property of my estate that secures a debt and any personal
X	/s/ David A.		X
	David A. Ka Signature of D		Signature of Debtor 2
	Date <u>Jur</u>	ne 27, 2017	Date

Fill in this infor	mation to identify your case:		Ch	eck one box	only as d	irected in this form and	d in Form
Debtor 1	David A. Kaufman		122	2A-1Supp:			
Debtor 2 (Spouse, if filing)				■ 1. There i	s no pres	umption of abuse	
United States	Bankruptcy Court for the: _Eastern District of N	lew York				o determine if a presu	•
Case number						nade under <i>Chapter 7</i> icial Form 122A-2).	Means Test
(if known)						does not apply now by service but it could a	
				☐ Check if	this is a	n amended filing	
	<u>form 122A - 1</u>						
Chapter	7 Statement of Your Curr	ent Mor	nthly Inc	ome			12/15
separate sheet to number (if know military service,	and accurate as possible. If two married people are to this form. Include the line number to which the ad n). If you believe that you are exempted from a pres complete and file Statement of Exemption from Presalculate Your Current Monthly Income	lditional informa sumption of abu	ation applies. Or se because you	the top of an	y addition	al pages, write your nam onsumer debts or becau	ne and case use of qualifying
1. What is y	your marital and filing status? Check one only	V.					
-	arried. Fill out Column A, lines 2-11.	, -					
	ed and your spouse is filing with you. Fill out	hoth Columns	s A and R lines	2-11			
	ed and your spouse is NOT filing with you. Y			, 2 11.			
	ing in the same household and are not legal	•	•	olumns A and	d B lines	2-11	
	ing separately or are legally separated. Fill ou	-					u declare under
per	nalty of perjury that you and your spouse are leg ng apart for reasons that do not include evading	gally separated	d under nonbar	nkruptcy law	that appli	es or that you and you	
101(10A). For 6 months, add	erage monthly income that you received from all sour example, if you are filing on September 15, the 6-month of the income for all 6 months and divide the total by 6. For all property, put the income from that property in one con	th period would be Fill in the result. [oe March 1 throug Do not include an	gh August 31. I y income amo	f the amou	nt of your monthly income an once. For example, if l	varied during the
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
•	ss wages, salary, tips, bonuses, overtime, ald deductions).	nd commission	ons (before	\$	0.00	\$	
	and maintenance payments. Do not include page is filled in.	ayments from	a spouse if	\$	0.00	\$	
of you or from an u and room	Ints from any source which are regularly paid your dependents, including child support. In Inmarried partner, members of your household, amates. Include regular contributions from a spoon of include payments you listed on line 3.	Include regular your depende	r contributions nts, parents,	\$	0.00	\$	
	me from operating a business, profession, o	r farm					
			tor 1				
Gross red	ceipts (before all deductions)	\$ 0.00					
•	and necessary operating expenses	-\$ 0.00		•	0.00	•	
	hly income from a business, profession, or farm	1\$ 0.00	Copy here ->	\$	0.00	\$	
6. Net incor	me from rental and other real property	Dok	otor 1				
0	sainte (la efene all ele dustinos)	\$ 0.00					
	ceipts (before all deductions)	-\$ 0.00					
•	and necessary operating expenses		Copy here ->	\$	0.00	\$	
	hly income from rental or other real property	\$0.00_	Copy nois ->	\$	0.00	\$	
7. Interest,	dividends, and royalties			φ	0.00	•	

Official Form 122A-1

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unemployment compensation			\$	0.00	\$	•	
	Do not enter the amount if you contend that the amount under the Social Security Act. Instead, list it here:	nt received was a benefi	it	·		·		
	For you §	0.0	0					
	For your spouse \$	3						
9.	Pension or retirement income. Do not include any a benefit under the Social Security Act.		s a	\$	0.00	\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hudomestic terrorism. If necessary, list other sources on total below.	Security Act or payment imanity, or international	ts or					
	1099 Business Income			\$3	,600.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	. \$	0.00	\$		
11.	Calculate your total current monthly income. Add li each column. Then add the total for Column A to the total for Column A		\$	3,600.00	+ _		Total of incom	3,600.00
Part	2: Determine Whether the Means Test Applies	to You						
12	Calculate your current monthly income for the year	r. Follow these steps:						
	12a. Copy your total current monthly income from line			Col	by line 11 h	noro->	\$	3 600 00
	12a. Copy your total current monthly income from line	11			Jy IIIIC 1111	1010-2	φ	3,600.00
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of the	ne form				12b	. \$	43,200.00
13.	Calculate the median family income that applies to	you. Follow these step	s:					
	Fill in the state in which you live.	NY						
		1						
	Fill in the number of people in your household.							54 400 00
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	online using the link sp	pecifie	d in the sepa	arate instru	13. ctions	\$	51,408.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, ch	eck bo	ox 1, There is	s no presur	nption of abu	se.	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The p	oresumption	of abuse is	determined b	y Form	122A-2.
Part								
	By signing here, I declare under penalty of perjure	y that the information on	this s	statement an	d in any att	achments is	true and	correct.
	X /s/ David A. Kaufman				,			
	David A. Kaufman Signature of Debtor 1							
	Date June 27, 2017 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file For	m 122A-2						
	If you checked line 14b, fill out Form 122A-2 and							
	you onconcumine 1-b, illi out i oith 122/1-2 and							

Official Form 122A-1

David A. Kaufman

Debtor 1

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

1. Pursuant to 11 U	.S.C. § 3		Debtor(s)	Case N Chapte		
1. Pursuant to 11 U	.S.C. § 3	OSURE OF COM	Debtor(s)	Chapte	r 7	
1. Pursuant to 11 U	.S.C. § 3	OSURE OF COM				
		obert of com	PENSATION OF AT	TORNEY FOR	DEBTOR(S)	
		within one year before the	2016(b), I certify that I am the e filing of the petition in bankruation of or in connection with the	iptcy, or agreed to be p	aid to me, for serv	
For legal sea	vices, I ł	nave agreed to accept		\$	1,500.00	<u>.</u>
			ived		665.00	<u> </u>
Balance Due					835.00	<u></u>
2. \$ 335.00 of		g fee has been paid.				
3. The source of the	compen	sation paid to me was:				
Debtor		Other (specify):				
4. The source of con	npensatio	on to be paid to me is:				
Debtor		-				
5. ■ I have not ag	reed to sl	hare the above-disclosed	compensation with any other po	erson unless they are m	nembers and assoc	lates of my law firm.
			npensation with a person or person en names of the people sharing			of my law firm. A
6. In return for the	above-di	sclosed fee, I have agreed	l to render legal service for all a	spects of the bankrupt	cy case, including:	
b. Preparation atc. Representatiod. [Other provis	nd filing n of the o ons as n	of any petition, schedules debtor at the meeting of c eeded]	rendering advice to the debtor is, statement of affairs and plan reditors and confirmation hearing of reaffirmation ag	which may be required ng, and any adjourned	; hearings thereof;	
Repres	entatio		ed fee does not include the followy dischargeability actions,		ances, relief fro	m stay actions or
			CERTIFICATION			
I certify that the fi		g is a complete statement	of any agreement or arrangement	nt for payment to me for	or representation o	f the debtor(s) in
June 27, 2017			/s/ Cooper J	Массо		
Date			Cooper J Ma Signature of A			
			Macco and S			
			2950 Expres	s Drive South		
			Suite 109 Islandia, NY	11740		
) Fax: 631-549-784	5	
			Name of law fi	rm		

United States Bankruptcy Court Eastern District of New York

In re	David A. Kaufman		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date:	June 27, 2017	/s/ David A. Kaufman
		David A. Kaufman
		Signature of Debtor
Date:	June 27, 2017	/s/ Cooper J Macco
2 4.0.		Signature of Attorney
		Cooper J Macco
		Macco and Stern, LLP
		2950 Express Drive South
		Suite 109
		Islandia, NY 11749
		631-549-7900 Fax: 631-549-7845

USBC-44 Rev. 9/17/98

AMCA PO Box 1235 Elmsford, NY 10523-0935

Board of Manaers of Willow Wood Condominium 400 Corporate Plaza Islandia, NY 11749

Capital One Bank (USA) NA PO Box 71083 Charlotte, NC 28272-1083

Catholic Health Services PO Box 95000-6525 Philadelphia, PA 19195-6525

Chrysler Capital-Lease PO Box 660647 Dallas, TX 75266-0647

Cohen Warren Meyer & Gitter, P.C. 80 Maple Avenue PO Box 768 Smithtown, NY 11787-0768

Dara Martin Orlando, Esq. Referee 330 Motor Parkway Suite 400 Hauppauge, NY 11788

Ditech Financial LLC PO Box 6176 Rapid City, SD 57709-6176

Einsidler Management Inc. PO Box 12557 Newark, NJ 07101

Frenkel, Lambert, Weiss, Weisman & Gordon, LLP 53 Gibson Street Bay Shore, NY 11706 Internal Revenue Service PO Box 7317 Philadelphia, PA 19101-7317

MRS Associates 1930 Olney Ave Cherry Hill, NJ 08003

Nassau University Medical Center ER PO Box 30749 New York, NY 10087

Pro Bill Po Box 2078 Huntington, WV 25720

Professional Claims Bureau, Inc. PO Box 9060 Hicksville, NY 11802-9060

Stony Brook Medicine 101 Nicolls Road Stony Brook, NY 11794-8191

Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735-9100

Synchrony Bank - PC Richa PO Box 960061 Orlando, FL 32896

Willow Wood @ East Setauket PO box 40 Blue Point, NY 11715

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

DEBTOR(S):	David A. Kaufman	CASE NO.:.
		-2(b), the debtor (or any other petitioner) hereby makes the following disclosure knowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before ses; (iii) are affiliates, as define or more of its general partners	or purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are ad in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are as; (vi) are partnerships which share one or more common general partners; or (vii) either of the Related Cases had, an interest in property that was or is included in the aa).]
□ NO RELATED	CASE IS PENDING OR HAS	BEEN PENDING AT ANY TIME.
■ THE FOLLOW	ING RELATED CASE(S) IS F	PENDING OR HAS BEEN PENDING:
1. CASE NO.: 08 ·	- 72389-ast JUDGE:	DISTRICT/DIVISION: Eastern District of New York
CASE STILL PENI	DING (Y/N): N	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED	(Refer to NOTE above): Prior Filing 5/09/2008
	LISTED IN DEBTOR'S SCH FRELATED CASE:	IEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRIC	CT/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STATE	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED	(Refer to NOTE above):
	LISTED IN DEBTOR'S SCH OF RELATED CASE:	IEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRIC	CT/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Disc	charged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to No	OTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A SCHEDULE "A" OF RELATED CASE:	" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals wh be eligible to be debtors. Such an individual will be required to	to have had prior cases dismissed within the preceding 180 days may not to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTO	RNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York	(Y/N): <u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner or	debtor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy ca as indicated elsewhere on this form.	ase is not related to any case now pending or pending at any time, except
/s/ Cooper J Macco	
Cooper J Macco Signature of Debtor's Attorney Macco and Stern, LLP 2950 Express Drive South	Signature of Pro Se Debtor/Petitioner
Suite 109 Islandia, NY 11749 631-549-7900 Fax:631-549-7845	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

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